

Electronic Patent Application Fee Transmittal**Application Number:**

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Filing Date:

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Title of Invention:

Cellulite ultrasound treatment

First Named Inventor/Applicant Name:

Eldad Torbati

Filer:

Weiyang Yang

Attorney Docket Number:

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U.S. National Stage under 35 USC 371 Filing Fees**Description****Fee Code****Quantity****Amount****Sub-Total in
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| Miscellaneous: | | | | |
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